

## NOMINATION OF REGISTERED AGENT

## **1. NOTES FOR THE COMPLETION OF FORM**

1. Please indicate with an" X" in the appropriate block(s) whichever is applicable

2. Please reflect the relevant customs and excise client number for the registered agent, if already registered or licensed for any activity regulated by the Act.

3. A separate form DA 185.D must be completed and submitted for each registered agent that is nominated and be attached to the DA 185 application form.

2. FOREIGN PRINCIP	AL PAR	TICUL	ARS																						
I / We (herein after know	vn as the	e "Prin	cipal):																						
Individual:	First two Names:																								
mainadai.	Surname:				-	-			-																
Passport No	:																(6	ə.g. \$	Pas South			untry ZAF)			
Company Registered	name:					-								-											
Company / CC / Trust Reg. No.																									
Business Physical ac	dress:																								
																		St	reet o	code	•				
Country	/ Code																								
Postal Address:																									
												1		_					tal co	ode					
Business			Code:	<b>`</b>		Tel.	(			)				Fax n	umb	er:	Code	e: (	)		Fax	. (			_)
			-mail a	addres	ss:				1																
Custo	Customs Number:																								
Herein represented by:																									
(1)										(2)	)														
being duly authorised th	ereto by		pacity) e of –							. ,							(C	apa	city)						
(a) *a resolution	passed	at a	mee	eting	of t	the	Boa	ard o	of I	Direc	ctors,	hel	d a	at									. or	ר th	ıe
(b) *express conser				. day	of						(0	CCY	Y)				; or								
(c) * being a persor	having	the m	anagei	ment	of an	y oth	ner a	issoci	atio	n;															
do hereby appoint / can	cel the p	arty s	pecifie	d und	er pa	art 3 (	of th	is ap	olica	ation	as R	egist	tere	d Age	ent fo	r the	funct	ions	set o	ut in	part	4.			
3. REGISTERED AGEN		FICUL	ARS (	as ref	lecte	ed or	n D/	A 185	)																
I / We accept / cancel th	e appoir	ntment	as Re	gister	ed A	gent	for	the fu	ncti	ons	set o	ut in	part	4 of	this a	applic	ation	:							
Individual:	First	First two Names:																							
		Sur	name:						1																
Identity No:																									
	Company Registered name:																								
Company / CC / Trust	Reg. No	<b>)</b> .																							
SARS Identification Customs Number: Income Tax Number:																									
Business Physical addre			1	I	I				I						1		I				1	1 1			

								Stre	et cod	e:				
Country Co	ode						•							
Postal Address:	1													
							F	Posta	l code					
Business Telepho	one: Code:	()	Tel. ()	Fax number:	Code	: (	)	F	ax. (		)			
Bu	isiness e-mai	l address:		1	I									
Herein represented by														
Herein represented by:														
(1)			;;;, ,)	(2)										
being duly authorised the	(Capacity) (Capacity) being duly authorised thereto by virtue of –													
(a) *a resolution passed at a meeting of the Board of Directors, held at														
(b) *express co	onsent in writi	ing of all the	e members of the close corpora	ation /* partners of th	e partne	ershi	.; or in /* tri	ustee	s of th	e trust	or			
			ement of any other association.		o paran		P,				, c.			
4. NOMINATED RELAT	TIONSHIP:													
Importer's register	ed agent:		Cancel relationship	Effective date:	С	С	Y	Y	Μ	Μ	D	D		
Exporter's register	ed agent:		Cancel relationship	Effective date:	С	С	Υ	Y	Μ	Μ	D	D		
Licensed remover's r			Cancel relationship	Effective date:	С	С	Y	Y	Μ	М	D	D		
	agent:													
5. SIGNED BY THE FO	REIGN PRIN	ICIPAL:												
	at the particu	lars in the a	application are true and correct	and undertake to c	omply v	vith s	such c	ustor	ns and	l excis	e			
laws and procedures.														
(1)			(2)											

(1)			(2)	
	Signature of Princi	ipal		Signature of Principal
atNam	ne of Town or City	on the	day of	Month and Year
In the presence of	of the subscribed witne	esses:		
Witnesses:	(1)	Signature	(1)	Signature
	(2)	Signature		Signature
6. SIGNED BY	THE REGISTERED AC	GENT:		

I/ We hereby declare that the particulars in the application are true and correct and undertake to comply with such customs and excise laws and procedures.

(1)			(2)					
	Signature of Registe	ered Agent		Signature of Registered Agent				
at		on the	day d	of				
	Name of Town or City		No.	Month and Year				
In the prese	ence of the subscribed with	esses:						
Witnesses:	(1)		(	(1)				
		Signature		Signature				
	(2)		(	(2)				
		Signature		Signature				